Arizona Department of Health Services Office for Children with Special Health Care Needs Children's Rehabilitative Services Administration	**Effective Date: 03/01/2007**
SUBJECT: Business Continuity	SECTION: BC 1.1

SUBTITLE: CRSA Business Continuity and Recovery Plan Specific Disruptions and Staff Roles

POLICY:

It is the policy of CRSA to plan for Specific Disruptions and identify the staff's and role in these disruptions.

PROCEDURE:

1) Disruptions affecting all staff:
   a) When a disaster or emergency is declared, the Management Team will conduct an emergency meeting to discuss the emergency/disaster condition, to design strategies to immediately address the specific emergency/disaster condition, and to assign tasks to Section Managers and their staff.
   b) Section Managers will convene meetings of each Section or use phone lists or "phone trees" to contact individuals in each section if not available or on the premises to alert staff of the emergency condition, to assign duties to carry out during the emergency, and to instruct individuals on how to proceed.
   c) Regular "status" meetings will be convened for the Management Team to monitor progress in the improvement of the emergency or disaster condition until the situation is resolved. Additional "status" meetings will be conducted as necessary for each section.
   d) Communication, with the following parties, will be made initially and through out the process (updates) as to the nature of any major contingencies or disruption of services, its onset, and expected resolution:
      i) The Director's Office - ADHS Business Continuity Plan Coordinator, (602) 542-1269;
      ii) Arizona Health Care Cost Containment System (AHCCCS) - Operations Compliance Officer, (602) 417-4796;
      iii) Other involved agencies; and
      iv) Contractors (see CRS Regional Contractors Contact Listing in the CRSA Business Continuity and Recovery Plan).

2) Contingency Plans for Loss of Phone System including electronic failure:
   a) Staff will be relocated to another floor, ADHS building, or other state agency buildings.

b) Telecommuting will be allowed for staff with homes equipped with computer and Internet accessibility.

c) Incoming and outgoing telephone calls will be re-routed to cellular phones or pre-designated areas.

d) Callers will be provided with alternate contact numbers (i.e.; cellular phone numbers or pager numbers) to reach their parties if voicemail is not functional.

e) Fax machines located in the 1740 building or other state agency buildings will be used.

3) Contingency Plans for Complete Loss of Building:

a) Staff will be relocated to ADHS 1740 building, or other state agency buildings.

b) Telecommuting will be allowed for staff with homes equipped with computer and Internet accessibility.

c) CRSA will document the testing procedures and results of the testing.

d) Incoming and outgoing telephone calls will be re-routed to cellular phones or pre-designated areas.

e) Callers will be provided with alternate numbers (i.e.; cellular phone numbers or pager numbers) to reach their parties if voice mail is not functional.

f) Fax machines located in the 1740 building or other state agency buildings will be used.

4) Contingency Plans for Loss of Computer System/Records or Networks:

a) If the computer system is irretrievably lost, the system contents are completely backed-up every day and stored off-site. The back-up tapes will be obtained from our vendor and the data restored to the server/computers in the alternative office space.

b) Back up of electronic media can be obtained within one business day and restored to functionality within two business days.

c) Original source data is available through CRS Regional Contractors' records.

5) Contingency Plans for Loss of Major CRS Provider/Facility Closure:

a) CRS Regional Contractors are required to notify CRSA of disruptions and how the disruption will be handled.

b) CRSA Management Team meets to review CRS Regional Contractors' plans to deal with losses and outages to determine if the contractors are handling the situation appropriately.

c) CRSA Division of Compliance coordinates the oversight of clinical, enrollment, and eligibility services and for investigating and coordinating grievances, appeals, and quality of care concern issues in the event of a disruption at a CRS Regional Contractor site.

d) CRSA Division of Compliance Section will:

     i)   Monitor the CRS Regional Contractor's timelines for recovery of functions;

     ii)   Track progress of restoration of critical processes;

     iii)   Perform random sampling to determine if the disruption did not interfere with the quality of member care; and

     iv)   Determine if any modifications are needed in the CRS Regional Contractors' Business Continuity and Recovery Plans.

6)   Contingency Plans for Loss of CRS Regional Contractor:

    a)   The CRSA Management Team will meet to:

       i)   Assess the situation and impact on member care;

       ii)   Develop interventions;

       iii)   Implement interventions including short and long term interventions for ensuring that members receive uninterrupted care; and

       iv)   Communicate the loss and interventions to the remaining CRS Regional Contractors and other affected parties.

7)   Contingency Plans for CRSA Operations:

    a)   Contingency Plans for Business Staff:

       i)   Capitation/invoice processing – Invoices and historical data or back-up data to be routed/forwarded to the key staff in the alternative setting to process invoices from off-site location(s). Utilize historical data to pro-rate dispersal of funds.

       ii)   E-mails will be routed to the appropriate staff.

       iii)   Contracting/Purchase Orders – hand write Purchase Requisitions.

       iv)   Communication with Contractors – Finance/Accounting staff.

    b)   Contingency Plans for QM/UM Staff:

       i)   Site plans, grievances, appeals, invoices, and historical or back-up data will be routed/forwarded to the key staff in the alternative setting.

       ii)   E-mails will be routed to the appropriate staff.

       iii)   Monitoring/oversight - conduct off-site monitoring and oversight activities.

       iv)   Utilizing the alternative communication methods discussed above, QM/UM staff will maintain communication with the CRS Regional Contractors.

       v)   Alternative access to the Quality of Care Database will be obtained.

       vi)   Oversight of clinical services - Utilize back-up data for claims review; conduct off-site monitoring and oversight activities.

       vii)   Investigating and coordinating grievance and appeals - Utilize back-up grievances (included in the Quality of Care Database) and appeals database system for investigating and coordinating grievances and appeals from off-site location(s).

       viii) Investigating and coordinating quality of care concerns/issues - Utilize back-up Quality of Care Database system for investigation

and coordination of quality of care concerns/issues from off-site location(s).

ix)   Ensuring that the interventions developed by CRSA or CRS Regional Contractors do not interfere with quality of member care or Performance Standards.

x)   QM/PI meetings will be held via conference call if necessary.

c)   Contingency Plans for Data Staff:

i)   Historical data or back-up data to be routed/forwarded to the key staff in the alternative setting.

ii)   E-mails will be routed to the appropriate staff.

iii)   Alternative access to the FTP server to be obtained.

iv)   Eligibility & enrollment/encounter reporting from CRS Regional Contractors and to AHCCCS - Utilize back-up data and validate data from off-site location(s).

v)   Utilizing the alternative communication methods discussed above, Data staff will maintain communication with the CRS Regional Contractors.

Approved:	Date:
[signature] CRSA Administrator	2/27/07
The Primary Position of Responsibility for this policy is the Office for Children With Special Health Care Needs Users are encouraged to suggest improvements regarding this policy and procedure.	